

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS THIS AN AMENDMENT?
Yes

(CFA-4) Summary Sheet

FILE NUMBER

TOTAL PAGES IN ENTIRE CFA-4 REPORT

	COMMITTEE INFORMAT	TION		
1. Full Name of Committee (as on Statement of Organ	ization) Check if this is	a new name		
John Elliott for Co	ouncil Commi	Hee		
Acronym or Abbreviated Name (if any)		3. Com	mittee Telephone Numi	^{ber} 3946
4. Mailing Address (address where all campaign finances)	e correspondence is received)	Check if th	is is a new address	
5. City, State, ZIP Code Nobles Ville, IN 46	060	6 Part	Affiliation (if applicable	.gn
CANDIDATE	INFORMATION (For Candida	te's Committe	ees Only)	
7. Full Name of Candidate (include any nickname)	1. 1	8. Part	y Affiliation or If Indeper	ndent Candidate
John Hidrew Fli	iott	Ke	Public	an
9. Office Sought (Include district number, if any. Not re	quired for exploratory committee) 10. Co	anty of Residence	
Common Counci	DISTRICT	-3 H	am// Ton	
TYPE	OF REPORT		CONVEN	TION CANDIDATES ONLY
11. Check one:			Check one	
Pre-Primary Pre-Election Annual Nomination				onvention
Final/Disbands Committee (lines 18, 19, and 20 must be "0")	Outgoing Treasurer (within 10 days amend Sta	tement of Organization	n) Dost-(Convention
12. Reporting Period:			COLUMN A	COLUMN B
From: /-/-07	hrough: 12-31-07		This Period	Year to Date
13. Cash on hand and investments at the beginning of	this reporting period.		#197.28	
14. Cash on hand and investments January 1, current				# ()
CONTRIBUTIONS A	The state of the s			
(Note: these amounts include in-kind contributions and	ioans, as well as cash contributions	:.)		#100000
15a. Itemized (use Schedule A)			7071156	\$1009.02
15b. Uniternized		CURTOTAL	\$374.00	9/123.00
15c. Add lines 15a and 15b in both columns		SUBTOTAL	# 314.00	12/32.02
16. Add lines 13 and 15c in Column A and lines 14 and		TOTAL	\$571.28	#2132.02
EXPENDIT				
(Note: These amounts include in-kind expenditures and			# 500 S	# A A A A A A A A A
17a. Itemized (use Schedule B) (Public Question: use S	Schedule C)		# 571.28	#2031.64
17b. Unitemized			0	100.38
17c. Add lines 17a and 17b in both columns		SUBTOTAL	\$571.28	₩2132.02
18. Cash on hand and investments at close of this reporting pe	riod (subtract 17c from 16 in both columns	s) TOTAL	0	
19. Debts OWED BY the committee (use Schedule D)			PEGGY	
20. Debts OWED TO the committee (use Schedule E)			CI	ED.
	TIFICATION		HAMILTON OF	FOR OFFICE USE ONLY
Signature on File	T OF MY KNOWLEDGE AND BELIEF	IT IS TRUE, COR	RECT AND COMPLETE	
	Title Klasurer	1	2-31-07	7- MAL 8005
		i	Date Dec 07	
	for sale or used for any commercial p	urpose. (IC 3-9-4-5	Aperson who knowingly	u u const
	person who fails to file a complete or and may be subject to civil penalties	r accurate report a	s required by the Indiana	



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

	FILE NUMBER		
Page	of		

CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
John Andrew Elliott 399 N. 10th St Noblesville, IN 46060 Contributor's Occupation of required Public Affairs Mar	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)	\$500.00	\$500.00	2-22-07 Judich Cass
John Andrew Elliott 399 N. 10th St. Noblesville, IN 46060 contributor's Occupation (if required Public Affairs Mar	Other Receipts: Interest Loan Misc. (specify)	₩353.52	\$353.52	3-09-07 Judich Cass
Timothy White 308 N. 9th St. Noblesville, IN 46060 contributor's Occupation it required Real Estate Investor	Contributions: Direct In-Kind (describe) Website Dev Other Receipts: Interest Loan Misc. (specify)	4 55,50	\$155.50 (413-07 John
4.	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
5. Contributor's Occupation (if required) Contributor's Occupation (if required)	Contributions: Direct In-Kind (describe) Other Receipts: Interest Loan Misc. (specify)			
	THIS PAGE OF SCHEDULE A	\$1009.02		
TOTAL OF ALL PAGES OF SCHEDULE A (Enter total on ITEM	ON THE LAST PAGE ONLY	\$1009.02		



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

FI		
Page	of	

RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
John A.Elliott & 399 N. 10+1 St Noblesville, 1N46060	Public Affairs Mg.	Direct In-Kind Payment of Debt Returned Contribution Other Burpose + 5 + 100 for 9 for MS	0	#353,52	3-05-07 3-09-07
Timothy White 308 N. 9+4 St Noblesville, 1N46060	Real Estate Investor	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	0	\$ <i> 55.50</i>	4-13-07
Logan St Signs+Banners 1720 S 10th St Noblesville, IN46060		Direct In-Kind Payment of Debt Returned Contribution Other Purpose: Signs & Name Fags	0	\$ 951.34	3-9-07 3-15-07 3-30-07 4-04-07 4-13-07
Noblesville Daily Times 802 Mulberry St Noblesville, 1N46060		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:	\$347.50	\$347.50	4-25-07 4-30-01
John A. Elliott 399 N 10th 5+ Noblesville, 1N4600	Public Affairs Mar	Direct In-Kind		\$223.78	12-31-07
Code	Common Sungi	Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
Code		Direct In-Kind Payment of Debt Returned Contribution Other Purpose:			
	SUBTOTAL THIS PAG	SE OF SCHEDULE B	\$2031.64		
TOTAL OF ALL PA	AGES OF SCHEDULE B ON THE	E LAST PAGE ONLY	\$2031.64		

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount. OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

	7		
Page	of		

CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT NATURE OF DEBT	DATE DEBT INCURRED	CUMULATIVE PAID YEAR TO DATE	OUTSTANDING BALANCE THIS PERIOD
John A Elliott 399 NIOth St Nobles Ville, IN46060 LENDERS OCCUPATION Public Affairs Mar		#250.00	2-22-01	#223.78	0
LENDER'S OCCUPATION					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION					
LENDER'S OCCUPATION:					
LENDER'S OCCUPATION:		SUBTOTA	L THIS PAGE O	F SCHEDULE D	\$
TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					\$ 8